## ARIZONA DEPARTMENT OF WATER RESOURCES

## Water Management Division 500 North Third Street, Phoenix, Arizona 85004 Phone (602) 417-2465 Fax (602) 417-2467

APPLICATION FOR UNDERGROUND STORAGE FACILITY PERMIT (A.R.S. § 45-811.01) FOR OFFICE USE ONLY APPLICATION FEE \$ 750.00 DUE UPON FILING Application No.: PERMIT FEE OF \$ 500.00, PLUS NOTICE AND PUBLICATION FEES TO Date Received: BE DETERMINED, WILL BE DUE PRIOR TO ISSUANCE OF PERMIT PLEASE SUBMIT ONE ORIGINAL AND FOUR COPIES OF THE COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS FACILITY DESIGN: (check one) APPLICATION FOR: (check one) ☐ Constructed ☐ Underground Storage Facility (USF) **■** Managed Modification of USF permit no.: 71-Renewal of USF permit no.: **GENERAL INFORMATION** 1. Name of Applicant: Mailing Address City State Contact Person: \_\_\_\_\_\_\_\_Fax: \_\_\_\_\_\_\_Fax: \_\_\_\_\_\_\_ 2. Is this a State Demonstration Project? \_\_\_\_\_ Yes \_\_\_\_ No (NOTE: Pursuant to A.R.S. § 45-893.01, only Conservation Districts qualify to participate in State Demonstration Project program.) 3. Name of Active Management Area or Irrigation Non-Expansion Area where the facility will be located: (If the facility is NOT located within an AMA or INA, please indicate "NONE.") 4. Name of groundwater basin and subbasin where the facility will be located: 5. Legal description of the location of the facility:

	(quarter/quarter/quarter/	section, township and rai	nge – see Appendix (	of USF Application Guide)	-			
6.	Does the applicant own the land	-						
7.	The total design capacity of the facility:							
		(ac	(acre-feet to be stored over the duration of the USF permit)					
8.	The maximum annual amount of							
	(acre-feet per year)							
9.	Proposed duration of permit: (vears)							
10.	Type of source water to be stored:							
	☐ CAP Water	☐ Effluent	☐ Decreed an Surface Wa	l Appropriative ter				
	If Decreed and Appropriative Surface Water, list river(s):							
11.	I agree under penalty of law to obtain any required floodplain use permit from the county flood control district before							
	beginning any construction activities, as required by A.R.S. § 45-811.01(C)(4).   Agree   Disagree							
12.	For managed USFs where effluent will be stored only: Are you requesting that this facility be designated as a facility							
	that could add value a national park, national monument or state park, as described in A.R.S. § 45-811.01(D)?							
	Yes □ No							
	If yes, please submit a completed USF Permit Application Supplement to designate a Managed Underground Storage							
	Facility as one that could add value to a national park, national monument, or state park and all additional information							
	as described on the USF Permit Application Supplement.							
13.	For permit modifications only, give a brief description of the modification(s) requested by this application:							
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					_			
		CUDDADTIN	IC EVIDENCE					
		SUPPORTIN	IG EVIDENCE					
	ck the following items that have							
	mitted prior to receiving a complet mit, submit only those items that a							
	lication Report in the USF Applic			1				
1.4	USF Site and Facility Characteris	tios:						
14.	Site Characteristics	☐ Geology						
l I								
l	☐ Facility Characteristics	☐ Hydrogeol	ogy					
15.	Unreasonable Harm and Hydrolo	gic Feasibility Analysis:						
[	Procedures and Results for Cal		of Impact and Mound	ing Analysis				
			ble Harm Analysis	☐ Monitoring Plan				
, 	☐ Water Quality	☐ Hydrologic Feasibili	•	☐ Operation and Maintenance	e			
	_							
16.	Legal Requirements:							
	☐ Technical Capability	☐ Financial Capability		☐ Legal Access				

## NOTARIZED SIGNATURE

I (We),, the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.								
Telephone		Signature of owner or authorized agent						
		Title						
Mailing Address		City	State	Zip				
STATE OF ARIZONA	) ) ss.							
County of	)							
Subscribed and sworn to before me this		day of	, 20					
Notary Public								
My commission expires								